**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

									<del></del>			
				S FILED - PART I (Column 1)		(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TC	OTAL CLAIMS						Γ	RATE	FEE	7	RATE	FEE
FOR			NUMBER I	FILED	NUME	NUMBER EXTRA		BASIC FEE	<del></del>	OR	BASIC FEE	<del></del>
TOTAL CHARGEABLE CLAIMS			20 min	20 minus 20=		· 0		X\$ 9=		OR	X\$18=	
INC	DEPENDENT CL	LAIMS	4 mi	4 minus 3 =		j		X40=		OR	X80=	80
MULTIPLE DEPENDENT CLAIM PI			RESENT				1		<u> </u>	1		
* If the difference in column 1 is I			less than zo	ero. ente	r "0" in (	column 2	L	+135=		OR	+270=	17.5
				MENDED - PART II				TOTAL		OR	TOTAL	790
		Column 1)	WENDED				;	SMALL E	ENTITY	OR	OTHER SMALL I	
		CLAIMS		HIGH		(Column 3)	-	7		•	J	
MENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***	: AIN/	=	Γ	X40=	-	OR	X80=	
	FIRST PRESE	NIATION OF IVIC	JLTIPLE DEF	ZENDEN	CLAIM			+135=		OR	+270=	
l				•			Ļ			JO., I		
							40	TOTAL		OR	TOTAL	1
		(Column 1)		(Colur	mn 2)	(Column 3)	AL	ODIT. FEE	<del></del>	J,	ADDIT. FEE	
		CLAIMS		HIGH		1				. ,		
8		REMAINING		NUM	IBER	PRESENT		Ì	ADDI-	1 1	· .	ADDI-
뒫		AFTER		PREVIO	OUSLY	EXTRA		RATE	TIONAL		RATE	TIONAL
삏		AMENDMENT		PAID	FOR	<del></del>	L		FEE			FEE
<b>AMENDMENT</b>	Total	<u> </u>	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MU	Minus	***	- 01 4114	=		X40=		OR	X80=	
	FINOI FRESE	MIATION OF IVIC	JLIIPLE DEF	ENDEN	CLAIM							
								+135=		OR	+270=	
				AD	TOTAL DIT. FEE		OR ,	TOTAL ADDIT. FEE				
_		(Column 1)	(Column 3)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			10011.1				
O		CLAIMS REMAINING		HIGH					ADDI-	Г		ADDI-
<u> =</u>		AFTER		PREVIO		PRESENT EXTRA	١,	RATE -	TIONAL		DATE	
回		AMENDMENT		PAID F		EXIMA	Ι.	MAIL I	FEE	1	RATE	TIONAL FEE
AMENDMENT C	Total	•	Minus	**		=	<b> </b> ,	X\$ 9=		OR	X\$18=	PEC
AME	Independent		Minus	***		=	-	X40=		ŀ		<del></del>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ľ	X4U=		OR	X80=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3										+270=		
11	If the "Highest Nur	mber Previously Pai	aid For IN THIS	S SPACE is	s lose than	n 20 anter "20 "	ΦDΓ	TOTAL DIT. FEE		OR ,	TOTAL	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEEADDIT. FEE												
-	110 1 11911001 110	Del Fleviously I ale	ויטומוטו (ויטומוטו	Maepenae	nt) is the	hignest number i	touna	in the appr	opriate box	in colu	ımn 1.	